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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**(Only for new nonprovisional applications under  
37 C.F.R. § 1.53(b))

Attorney Docket No.

706501US2

First Inventor or  
Application Identifier

Randy S. Beals

Title Creep Resistant Magnesium Alloy

Express Mail Label No.

EV026310061US as deposited on: 1/26/2004

**APPLICATION ELEMENTS**See MPEP Chapter 600 concerning utility patent  
application contents.ADDRESS TO: MS Patent Application  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-14501. ☒ \*Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original and a duplicate for fee processing)5. ☐ Microfiche Computer Program (Appendix)2. ☒ Specification [Total Pages 10]  
(preferred arrangement set forth below)6. Nucleotide and/or Amino Acid Sequence Submission  
(If applicable, all necessary)

- Descriptive title of the invention
- Cross References to Related Applications
- Statement Regarding Fed Sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claims(s)
- Abstract of the Disclosure

a. ☐ Computer Readable Copyb. ☐ Paper Copy (identical to computer copy)c. ☐ Statement verifying identity of above copies2A. ☒ Preliminary Amendment: Please insert the following  
sentence prior to the first line of the specification of the application:  
This application claims the benefit of U.S. Provisional Application  
Serial No. 60/524,600, filed November 25, 2003.3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 10]7. ☐ Assignment Papers (cover sheet & document(s))8. ☐ 37 C.F.R. § 3.37(b) Statement ☐ Power of  
(when there is an assignee) Attorney9. ☐ English Translation Document (if applicable)10. ☒ Information Disclosure ☒ Copies of IDS  
Statement (IDS)/PTO-1449 Citations- "Foreign" and "Other"11. ☐ Preliminary Amendment12. ☒ Return Receipt Postcard MPEP 503)13. ☐ Statement (s) ☐ Statement filed in prior  
(PTO/SB/09-12) application, Status still proper  
and desired14. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)15. ☐ Other:4. Oath or Declaration [Total Pages 2]

- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. § 1.63 (d))  
(for continuation/divisional with Box 16 completed)

i. ☐ **DELETION OF INVENTOR(S)**Signed statement attached deleting inventor(s)  
Named in the prior application, see 37 C.F.R.  
§ 1.63(d)(2) and 1.33 (b).**\*NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY  
SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS  
REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR  
APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**16. If a **CONTINUING APPLICATION**, Check appropriate box, and supply the requisite information below and in a preliminary amendment:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_

**FOR CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under  
Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The  
incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**17. CORRESPONDENCE ADDRESS**☐ Customer Number or Bar Code Label **24938** or ☒ Correspondence address below  
(Insert Customer No. or Attach bar code label here)

Name	Donald J Wallace				
	DaimlerChrysler Intellectual Capital Corporation				
Address	CIMS 483-02-19				
	800 Chrysler Drive				
City	Auburn Hills	State	Michigan	Zip Code	48326-2757
Country	United States	Telephone	(248) 944-6522	Fax	(248) 944-6537

Name (Print or Type)	Donald J Wallace	Registration No.	43,977
Signature	<i>Donald J Wallace</i>	Date	1/26/2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any  
comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office,  
Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box  
Patent Application, Washington, D.C. 20231.22581 U.S. PTO  
10/765258  
012604

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**FEE TRANSMITTAL****For FY 2001**

Patent fees are subject to annual revision.  
 Small Entity payments must be supported by a small entity statement,  
 otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

**Complete if Known**

Application Number	
Filing Date	
First Named Inventor	Randy S. Beals
Examiner Name	
Group / Art Unit	
Attorney Docket No.	706501US2

**TOTAL AMOUNT OF PAYMENT** (\$)**770****METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 03-1800  
 Deposit Account Name DaimlerChrysler Intellectual Capital Corporation

- ☒ Charge Any Additional Fee Required Under  
 37 CFR 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
1001	2001	770	385	Utility filing fee	<u>770</u>
1002	2002	340	170	Design filing fee	
1003	2003	530	265	Plant filing fee	
1004	2004	770	385	Reissue filing fee	
1005	2005	160	80	Provisional filing fee	
<b>SUBTOTAL (1)</b>					<u>770</u>

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claim	Fee from below	Fee Paid
<u>9</u>	-20** = <u>0</u>	X <u>0</u>	= <u>0</u>
Independent Claims	<u>1</u>	- 3** = <u>0</u>	X <u>0</u> = <u>0</u>
Multiple Dependent		<u>290</u>	= <u>0</u>

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description
1202	2202	18	9	Claims in excess of 20
1201	2201	86	43	Independent claims in excess of 3
1203	2203	290	145	Multiple dependent claim, if not paid
1204	2204	86	43	** Reissue independent claims over original patent
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$)**0****FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge-late filing fee or oath	
127	227	50	25	Surcharge-late provisional filing fee or cover sheet	
139	239	130	130	Non-English specification	
147	247	2,520	2,520	For filing a request for examination	
112	212	920*	920*	Requesting publication of SIR prior to Examiner action	
113	213	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for reply within first month	
116	216	390	195	Extension for reply within second month	
117	217	890	445	Extension for reply within third month	
118	218	1,390	695	Extension for reply within fourth month	
128	228	1,890	945	Extension for reply within fifth month	
119	219	310	155	Notice of Appeal	
120	220	310	155	Filing a brief in support of an appeal	
121	221	270	135	Request for oral hearing	
138	238	1,510	1,510	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive – unavoidable	
141	241	1,240	620	Petition to revive – unintentional	
142	242	1,240	620	Utility issue fee (or reissue)	
143	243	440	220	Design issue fee	
144	244	600	300	Plant issue fee	
122	222	130	130	Petitions to the Commissioner	
123	223	50	50	Petitions related to provisional applications	
126	226	180	180	Submission of Information Discl. Stmt.	
581	281	40	40	Recording of each patent assignment per property (times number of properties)	
146	246	710	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	249	710	355	For each additional invention to be examined (34 CFR 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					
* Reduced by Basic Filing Fee Paid					
<b>SUBTOTAL (3)</b>					<b>(\$)<u>0</u></b>

**SUBMITTED BY**

Typed or Printed Name

Donald J Wallace

Signature

Date

1/26/2004

**Complete (if applicable)**

Reg. Number

43,977

Deposit Account User ID